

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			10-01
O.I.P.E. CLASSIFIER	C TH	744	10/16/01
FORMALITY REVIEW			10-31-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	10/3
1	✓
2	
3	✓
4	
5	✓
6	
7	✓
8	✓
9	✓
10	✓
11	✗
12	✓
13	✓
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	N
24	N
25	N
26	N
27	N
28	N
29	N
30	N
31	N
32	N
33	N
34	N
35	N
36	N
37	N
38	N
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	N
47	N
48	N
49	N
50	N

Claim	Date
Final Original	10/3
51	✓
52	N
53	N
54	N
55	N
56	N
57	N
58	N
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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10/31/01
10/30